

AUTHENTICATED, OHIO LEGISLATIVE SERVICE COMMISSION DOCUMENT #254233

Ohio Administrative Code

Rule 3701-19-18 Counseling and bereavement services.

Effective: January 23, 2020

(A) Each hospice care program shall make available counseling services to the hospice patient and the hospice patient's family. Counseling services shall include dietary, spiritual, bereavement and any other necessary counseling services while the patient is enrolled in the hospice care program. Counseling services shall be provided by a qualified interdisciplinary team member or one or more other qualified individuals, as determined by the hospice care program.

(B) Counseling services shall be organized to meet the needs of the hospice patients and their families.

(1) The hospice care program shall assess the needs of patients and families for spiritual counseling, in accordance with their religious preferences.

(2) The hospice care program shall make reasonable efforts to arrange for visits of clergy and other members of religious organizations in the community to patients who request visits and shall apprise patients of this opportunity.

(C) The hospice care program shall provide dietary counseling. Dietary counseling shall include use of food and mealtime to promote quality of life for hospice patients and to meet their needs for symptom control. Dietary counseling shall be planned and provided by or under the supervision of a dietitian or, if the program is unable to obtain the services of a dietitian, by a nurse.

(D) Each hospice care program shall provide bereavement services, as needed, for hospice patients' families. These services shall be provided for up to one year after the patient's death. Bereavement services shall be provided under the supervision of a designated qualified professional.

(1) The professional designated to supervise bereavement services shall have education or experience or both in providing those services.



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(2) Bereavement services shall be based on an assessment of the family's needs and its ability to cope with grief.

(3) The plan of care for bereavement services shall reflect family needs and shall specify the frequency services are to be delivered and the persons furnishing the services.